## 

| FIII   | in this inform        | nation to identify you    | r case:  |                    |                       |                        |              |                                    |
|--------|-----------------------|---------------------------|--|--------------------|-----------------------|------------------------|--------------|------------------------------------|
| Det    | otor 1                | Travis Anthony First Name | Flanders Middle Name                                       | Lac                | st Name               |                        |              |                                    |
| Deb    | otor 2                | i iist ivaille            | Middle Name  | La                 | tivanie               |                        |              |                                    |
| (Spo   | ouse if, filing)      | First Name                | Middle Name  | Las                | st Name               |                        |              |                                    |
| Uni    | ted States Bar        | nkruptcy Court for the:   | NORTHERN DISTRICT  | OF GEOR            | 3IA - ATLANTA D       | IVISION                |              |                                    |
| Cas    | se number 1           | 9-64997-WLH               |  |                    |                       |                        |              |                                    |
| (if kn | nown)                 |                           |  |                    |                       |                        | _            | neck if this is an                 |
|        |                       |                           |  |                    |                       |                        | an           | nended filing                      |
| ∩f     | ficial For            | rm 107                    |  |                    |                       |                        |              |                                    |
|        |                       |                           | Affairs for Indivi   | eleuhi             | Filing for F          | Rankruntov             |              | 4/1:                               |
|        |                       |                           | ible. If two married people                                |                    |                       |                        | for sunn     |                                    |
| info   | rmation. If me        | ore space is needed       | , attach a separate sheet to                               |                    |                       |                        |              |                                    |
| num    | iber (if known        | ı). Answer every que      | stion.   |                    |                       |                        |              |                                    |
| Par    | t 1: Give D           | etails About Your M       | arital Status and Where Yo                                 | u Lived Be         | fore                  |                        |              |                                    |
| 1.     | What is your          | current marital state     | us?  |                    |                       |                        |              |                                    |
|        | ☐ Married             |                           |  |                    |                       |                        |              |                                    |
|        | ■ Not mari            | ried                      |  |                    |                       |                        |              |                                    |
| 2.     | During the la         | ıst 3 years, have you     | lived anywhere other than                                  | n where yo         | u live now?           |                        |              |                                    |
|        | □ No                  |                           |  |                    |                       |                        |              |                                    |
|        |                       | t all of the places you   | lived in the last 3 years. Do i                            | not include        | where you live no     | w.                     |              |                                    |
|        |                       | ior Address:              | Dates Debtor   |                    | Debtor 2 Prior A      |                        |              | Dates Debtor 2                     |
|        | Debtor 1 Pri          | or Address.               | lived there  | •                  | Debioi 2 Prior A      | uuress.                |              | lived there                        |
|        | 839 Excha             | nge Circle                | From-To:<br><b>04/17 to 05/1</b>                           | 0                  | ☐ Same as Debtor      | 1                      |              | Same as Debtor 1                   |
|        | Apt. 518<br>Bethlehem | ı, GA 30620               | 04/17 10 03/1  | 3                  |                       |                        |              | From-To:                           |
|        |                       |                           |  |                    |                       |                        |              |                                    |
|        |                       | e Ridge Drive             | From-To:<br><b>01/15 to 04/1</b>                           | 7                  | ☐ Same as Debtor      | 1                      |              | Same as Debtor 1                   |
|        | Betnienem             | ı, GA 30620               | 01/13 (0 04/1  |                    |                       |                        |              | From-To:                           |
|        |                       |                           |  |                    |                       |                        |              |                                    |
| 3.     |                       |                           | ver live with a spouse or lealifornia, Idaho, Louisiana, N |                    |                       |                        |              |                                    |
| Siait  | es and territori      | es iliciude Alizolia, Ca  | alliottila, luario, Louisiaria, iv                         | evaua, mev         | iviexico, Fuerto r    | Nico, Texas, Washingt  | JII allu VVI | scorisiri.)                        |
|        | ■ No                  |                           |  |                    |                       |                        |              |                                    |
|        |                       | ke sure you fill out Sc   | hedule H: Your Codebtors (C                                | Official Forn      | ı 106H).              |                        |              |                                    |
| Par    | t 2 Explain           | n the Sources of You      | ır Income  |                    |                       |                        |              |                                    |
| 4.     | Did you have          | any income from e         | mployment or from operati                                  | ing a husin        | ess during this v     | rear or the two previo | nus calen    | dar vears?                         |
| ₹.     | Fill in the tota      | I amount of income yo     | ou received from all jobs and                              | l all busines      | ses, including par    | t-time activities.     | rus calein   | uai yeais:                         |
|        | If you are filin      | g a joint case and you    | ı have income that you recei                               | ve together        | , list it only once u | nder Debtor 1.         |              |                                    |
|        | □ No                  |                           |  |                    |                       |                        |              |                                    |
|        | Yes. Fill             | in the details.           |  |                    |                       |                        |              |                                    |
|        |                       |                           | Debtor 1   |                    |                       | Debtor 2               |              |                                    |
|        |                       |                           | Sources of income  |                    | income                | Sources of incom       |              | Gross income                       |
|        |                       |                           | Check all that apply.                                      | (before<br>exclusi | deductions and ons)   | Check all that appl    | у.           | (before deductions and exclusions) |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1 Travis Anthony Flanders

**Debtor 1** Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) From January 1 of current year until \$40,000.00 ☐ Wages, commissions, Wages, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business \$85,000.00 For last calendar year: ☐ Wages, commissions, Wages, commissions. (January 1 to December 31, 2018) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$85,000.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until Fiance's Contribution \$10,000.00 the date you filed for bankruptcy: Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825\* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,825\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

**Creditor's Name and Address** 

Dates of payment

**Total amount** paid

Amount you still owe

Was this payment for ...

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| 7.  | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.  No  Yes. List all payments to an insider. |                            |   |                      |  |                       |  |  |
|-----|---|----------------------------|---|----------------------|--|-----------------------|--|--|
|     | Insider's Name and Address  | Dates of payment           | Total amount paid   | Amount you still owe | Reason for t                           | his payment           |  |  |
| 8.  | Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos  No  |                            |   |                      | account of a del                       | bt that benefited an  |  |  |
|     | ☐ Yes. List all payments to an insider  |                            |   |                      |  |                       |  |  |
|     | Insider's Name and Address  | Dates of payment           | Total amount paid   | Amount you still owe | Reason for t                           |                       |  |  |
| Pai | rt 4: Identify Legal Actions, Repossession  | s, and Foreclosures        |   |                      |  |                       |  |  |
| 9.  | Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.   |                            |   |                      |  |                       |  |  |
|     | Case title  | Nature of the case         | Court or agency   |                      | Status of the                          | case                  |  |  |
|     | Case number   |                            |   |                      |  |                       |  |  |
|     | The Exchange vs TRAVIS FLANDERS, KIRKLAND FLANDERS 2019MV1526   | FORCIBLE<br>ENTRY/DETAINER | Magistrate Cou<br>County<br>652 Barrow Par<br>Suite F<br>Winder, GA 306 | rk Drive,            | ■ Pending □ On appea □ Conclude - 0.00 |                       |  |  |
| 10. | Within 1 year before you filed for bankrupto Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.  |                            | rty repossessed, f  | oreclosed, garni     | ished, attached,                       | seized, or levied?    |  |  |
|     | Creditor Name and Address   | Describe the Property      |   | Date                 | )                                      | Value of the property |  |  |
|     |   | Explain what happened      |   |                      |  | property              |  |  |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment beca  ■ No □ Yes. Fill in the details.   |                            | uding a bank or fin   | nancial institutio   | n, set off any ar                      | mounts from your      |  |  |
|     | Creditor Name and Address   | Describe the action the    | creditor took   | Date<br>take         | e action was<br>en                     | Amount                |  |  |
| 12. | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at ■ No □ Yes  |                            | rty in the possessi   | ion of an assign     | ee for the benef                       | it of creditors, a    |  |  |

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| Pa  | rt 5: List Certain Gifts and Contribution   | s        |  |                                   |                         |  |  |  |  |
|-----|---|----------|--|-----------------------------------|-------------------------|--|--|--|--|
| 13. | Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  ■ No  □ Yes. Fill in the details for each gift. |          |  |                                   |                         |  |  |  |  |
|     | Gifts with a total value of more than \$60 per person   | 0        | Describe the gifts   | Dates you gave the gifts          | Value                   |  |  |  |  |
|     | Person to Whom You Gave the Gift and Address:   |          |  |                                   |                         |  |  |  |  |
| 14. | Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift or co  |          | did you give any gifts or contributions with a tota  | al value of more than             | \$600 to any charity?   |  |  |  |  |
|     | Gifts or contributions to charities that to<br>more than \$600<br>Charity's Name<br>Address (Number, Street, City, State and ZIP Code                                     | otal     | Describe what you contributed  | Dates you contributed             | Value                   |  |  |  |  |
| Pa  | rt 6: List Certain Losses   |          |  |                                   |                         |  |  |  |  |
| 15. | Within 1 year before you filed for bankrup or gambling?  No Yes. Fill in the details.   | ptcy or  | since you filed for bankruptcy, did you lose any   | thing because of the              | t, fire, other disaster |  |  |  |  |
|     | Describe the property you lost and  | Descr    | ibe any insurance coverage for the loss  | Date of your                      | Value of property       |  |  |  |  |
|     | how the loss occurred   | Include  | e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.                              | loss                              | lost                    |  |  |  |  |
| Pa  | rt 7: List Certain Payments or Transfers  | <b>i</b> |  |                                   |                         |  |  |  |  |
| 16. | consulted about seeking bankruptcy or p   | repari   | id you or anyone else acting on your behalf payong a bankruptcy petition? rs, or credit counseling agencies for services require |                                   | rty to anyone you       |  |  |  |  |
|     | □ No  |          |  |                                   |                         |  |  |  |  |
|     | Yes. Fill in the details.   |          |  |                                   |                         |  |  |  |  |
|     | Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Payment, if Not Y   | ou       | Description and value of any property transferred  | Date payment or transfer was made | Amount of payment       |  |  |  |  |
|     | Clark & Washington, LLC<br>3300 Northeast Expressway<br>Building 3<br>Atlanta, GA 30341   |          | Chapter 13 Filing Fee  | 09/2019                           | \$310.00                |  |  |  |  |
|     | CIN Legal Data Services<br>Box 88229<br>Milwaukee, WI 53288   |          | Various Pre-bankruptcy Services  | 09/2019                           | \$70.00                 |  |  |  |  |
|     | Clark & Washington, LLC<br>3300 Northeast Expressway<br>Building 3<br>Atlanta, GA 30341   |          | Conversion to Chapter 7 Bankruptcy   | 12/2019                           | \$25.00                 |  |  |  |  |
|     |   |          |  |                                   |                         |  |  |  |  |

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| 17. | Within 1 year before you filed for bankruptopromised to help you deal with your creditor Do not include any payment or transfer that you  | rs or to make payments   |                              |                | or transfer any prope                                   | rty to anyone who                             |
|-----|---|--|------------------------------|----------------|---|---|
|     | ☐ Yes. Fill in the details.   |  |                              |                |   |   |
|     | Person Who Was Paid<br>Address  | Description and values   | alue of any prop             | erty           | Date payment<br>or transfer was<br>made                 | Amount of payment                             |
|     | Within 2 years before you filed for bankruptout transferred in the ordinary course of your but linclude both outright transfers and transfers mainclude gifts and transfers that you have already No  Yes. Fill in the details. | usiness or financial affa<br>ade as security (such as t                  | airs?<br>the granting of a s |                |   |   |
|     | Person Who Received Transfer<br>Address   | Description and very property transfer                                   |                              |                | any property or<br>received or debts<br>change          | Date transfer was made                        |
|     | Person's relationship to you  Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro No Yes. Fill in the details.  |  | y property to a s            | elf-settled tr | ust or similar device o                                 | of which you are a                            |
|     | Name of trust   | Description and v  | alue of the prop             | erty transferr | ed  | Date Transfer was                             |
|     |   | ·  |                              | •              |   | made  |
| Par | 8: List of Certain Financial Accounts, Ins  | struments, Safe Deposi   | t Boxes, and Sto             | rage Units     |   |   |
|     | Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, assoc ■ No □ Yes. Fill in the details.                               | or other financial accou   | nts; certificates            | of deposit; sh |   |   |
|     | Name of Financial Institution and<br>Address (Number, Street, City, State and ZIP<br>Code)  | Last 4 digits of account number  | Type of accourtinstrument    | clo<br>mo      | ite account was<br>osed, sold,<br>oved, or<br>insferred | Last balance<br>before closing or<br>transfer |
| 21. | Do you now have, or did you have within 1 y cash, or other valuables?  No Yes. Fill in the details.   | ear before you filed for   | r bankruptcy, any            | / safe deposi  | t box or other deposi                                   | tory for securities,                          |
|     | Name of Financial Institution   | Who else had acc   | coss to it?                  | Describe the   | contonts  | Do you still                                  |
|     | Address (Number, Street, City, State and ZIP Code)  | Address (Number, S<br>State and ZIP Code)                                |                              | Describe the   | contents  | have it?                                      |
| 22. | Have you stored property in a storage unit o  | or place other than your   | home within 1 y              | ear before yo  | ou filed for bankrupto                                  | y?  |
|     | ■ No  |  |                              |                |   |   |
|     | Yes. Fill in the details.   |  |                              |                |   |   |
|     | Name of Storage Facility<br>Address (Number, Street, City, State and ZIP Code)  | Who else has or I<br>to it?<br>Address (Number, S<br>State and ZIP Code) |                              | Describe the   | contents  | Do you still have it?                         |

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Debtor 1 Travis Anthony Flanders

| Pai | art 9: Identify Property You Hold or Control   | ol for Someone Else   |                                       |                      |  |  |  |  |
|-----|--|---|---------------------------------------|----------------------|--|--|--|--|
| 23. | Do you hold or control any property that s for someone.  | omeone else owns? Include any prope                                       | rty you borrowed from, are storing fo | or, or hold in trust |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.   |   |                                       |                      |  |  |  |  |
|     | Owner's Name Address (Number, Street, City, State and ZIP Code)  | Where is the property?<br>(Number, Street, City, State and ZIP            | Describe the property                 | Value                |  |  |  |  |
| Do  | The Cive Details About Environmental In  | Code)   |                                       |                      |  |  |  |  |
|     | art 10: Give Details About Environmental In  |   |                                       |                      |  |  |  |  |
| For | r the purpose of Part 10, the following defini   | tions apply:  |                                       |                      |  |  |  |  |
|     | Environmental law means any federal, statoxic substances, wastes, or material into regulations controlling the cleanup of these  | the air, land, soil, surface water, groun                                 |                                       |                      |  |  |  |  |
|     | Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. |   |                                       |                      |  |  |  |  |
|     | Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.              |   |                                       |                      |  |  |  |  |
| Rep | port all notices, releases, and proceedings t  | •   | n thev occurred.                      |                      |  |  |  |  |
| ·   | Has any governmental unit notified you th  | , ,   | •                                     | nental law?          |  |  |  |  |
|     | _  |   |                                       |                      |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.   |   |                                       |                      |  |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit Address (Number, Street, City, State ar ZIP Code)       | Environmental law, if you know it     | Date of notice       |  |  |  |  |
| 25. | Have you notified any governmental unit of   | ,   |                                       |                      |  |  |  |  |
|     | ■ No   |   |                                       |                      |  |  |  |  |
|     | ☐ Yes. Fill in the details.  |   |                                       |                      |  |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State an<br>ZIP Code) | Environmental law, if you know it     | Date of notice       |  |  |  |  |
| 26. | Have you been a party in any judicial or ac  | dministrative proceeding under any env                                    | rironmental law? Include settlements  | and orders.          |  |  |  |  |
|     | No   |   |                                       |                      |  |  |  |  |
|     | ☐ Yes. Fill in the details.  |   |                                       |                      |  |  |  |  |
|     | Case Title Case Number   | Court or agency Name Address (Number, Street, City, State and ZIP Code)   | Nature of the case                    | Status of the case   |  |  |  |  |
| Pai | art 11: Give Details About Your Business o   | r Connections to Any Business   |                                       |                      |  |  |  |  |
| 27. | Within 4 years before you filed for bankru   | otcv. did vou own a business or have a                                    | ny of the following connections to an | v business?          |  |  |  |  |
|     |  | l in a trade, profession, or other activity                               | ,                                     | y zaomece :          |  |  |  |  |
|     | _  | npany (LLC) or limited liability partnersh                                | •                                     |                      |  |  |  |  |
|     | ☐ A partner in a partnership   | .p, (==0, 0. miniou nuomity purtificion                                   | ··················/                   |                      |  |  |  |  |
|     | ☐ An officer, director, or managing e  | executive of a corporation  |                                       |                      |  |  |  |  |

☐ An owner of at least 5% of the voting or equity securities of a corporation

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|  | ■ No. None of the above applies. Go to   | Part 12.  |  |
|--|--|---|--|
|  | ☐ Yes. Check all that apply above and fil  | I in the details below for each business.                                   |  |
|  | Business Name<br>Address   | Describe the nature of the business   | Employer Identification number<br>Do not include Social Security number or ITIN.                                   |
|  | (Number, Street, City, State and ZIP Code)   | Name of accountant or bookkeeper  | Dates business existed   |
| 28.                                    | Within 2 years before you filed for bankrup institutions, creditors, or other parties.   | tcy, did you give a financial statement to a                                | nyone about your business? Include all financial   |
|  | ■ No □ Yes. Fill in the details below.   |   |  |
|  | Name Address (Number, Street, City, State and ZIP Code)  | Date Issued   |  |
| Par                                    | t 12: Sign Below   |   |  |
| are t                                  | true and correct. I understand that making a<br>a bankruptcy case can result in fines up to  | false statement, concealing property, or o                                  | declare under penalty of perjury that the answers obtaining money or property by fraud in connection ars. or both. |
|  | I.S.C. §§ 152, 1341, 1519, and 3571.   |   | ,  |
| /s/<br>Tra                             | J.S.C. §§ 152, 1341, 1519, and 3571.  Travis Anthony Flanders  avis Anthony Flanders  nature of Debtor 1   | Signature of Debtor 2   |  |
| /s/<br>Tra                             | Travis Anthony Flanders avis Anthony Flanders nature of Debtor 1   |   |  |
| /s/<br>Tra<br>Sig                      | Travis Anthony Flanders  Avis Anthony Flanders  nature of Debtor 1  December 3, 2019  you attach additional pages to Your Statem  lo   | Signature of Debtor 2  Date   |  |
| /s/<br>Tra<br>Sig<br>Dat<br>Did<br>■ N | Travis Anthony Flanders  Avis Anthony Flanders  nature of Debtor 1  December 3, 2019  you attach additional pages to Your Statem lo 'es  you pay or agree to pay someone who is no | Signature of Debtor 2  Date  ent of Financial Affairs for Individuals Filin | ng for Bankruptcy (Official Form 107)?   |

| Travis Anthony F First Name  Print Name  By Sankruptcy Court for the:  By 19-64997-WLH  Form 106A/B  Sankruptcy Court for the:  Form 106A/B  Sankruptcy Court for the: | Middle Name Last Name  Middle Name Last Name  NORTHERN DISTRICT OF GEORGIA - ATLANTA DIVIS   | SION  | ☐ Check if this is a amended filing   |
|--|--|---|---|
| First Name First Name es Bankruptcy Court for the: er 19-64997-WLH  Form 106A/B Iule A/B: Prop   | Middle Name Last Name  Middle Name Last Name  NORTHERN DISTRICT OF GEORGIA - ATLANTA DIVIS   | BION  |   |
| First Name as Bankruptcy Court for the: ar 19-64997-WLH  Form 106A/B Iule A/B: Prop  | Middle Name Last Name  NORTHERN DISTRICT OF GEORGIA - ATLANTA DIVIS  | SION  |   |
| Form 106A/B  | NORTHERN DISTRICT OF GEORGIA - ATLANTA DIVIS   | BION  |   |
| Form 106A/B  |  | SION  |   |
| Form 106A/B<br>Iule A/B: Prop  |  |   |   |
| Form 106A/B<br>Iule A/B: Prop  |  |   |   |
| lule A/B: Prop   |  |   |   |
| lule A/B: Prop   |  |   |   |
|  | ヘ <b>ドキ</b> \  |   |   |
|  | e items. List an asset only once. If an asset fits in more than  |   | 12/15   |
| ·<br>cribe Each Residence, Building  |  |   |   |
| to Part 2.   |  |   |   |
| here is the property?  |  |   |   |
|  |  |   |   |
| cribe Your Vehicles  |  |   |   |
| ns, trucks, tractors, sport ut   |  |   |   |
|  | lity vehicles, motorcycles   |   |   |
| DAM  |  | Do not deduct secured cla   | aims or exemptions. Put   |
| : RAM<br>1500  | Who has an interest in the property? Check one   | Do not deduct secured clause amount of any secure   | ed claims on Schedule D:  |
| 1500   | Who has an interest in the property? Check one  Debtor 1 only  | the amount of any secure<br>Creditors Who Have Clair  | d claims on Schedule D:<br>ms Secured by Property.  |
| 1500<br>2018   | Who has an interest in the property? Check one   | the amount of any secure  | ed claims on Schedule D:  |
| 1500<br>2018   | Who has an interest in the property? Check one  □ Debtor 1 only □ Debtor 2 only  | the amount of any secure<br>Creditors Who Have Clair<br>Current value of the  | ed claims on Schedule D:<br>ms Secured by Property.<br>Current value of the   |
| 1500<br>2018<br>eximate mileage: 59,   | Who has an interest in the property? Check one  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only   | the amount of any secure<br>Creditors Who Have Clair<br>Current value of the  | ed claims on Schedule D:<br>ms Secured by Property.<br>Current value of the   |
| 1500 2018 eximate mileage: 59, information:  | Who has an interest in the property? Check one  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)   | the amount of any secure Creditors Who Have Clair Current value of the entire property? \$34,990.00   | d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$34,990.0  |
| 1500 2018 eximate mileage: 59, information:  | Who has an interest in the property? Check one  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one                             | the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$34,990.00  Do not deduct secured clair the amount of any secure  | d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$34,990.0  aims or exemptions. Put d claims on Schedule D:   |
| 1500 2018 eximate mileage: 59, information:  | Who has an interest in the property? Check one  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)   | the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$34,990.00  Do not deduct secured clair the amount of any secure Creditors Who Have Clair   | d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$34,990.0  aims or exemptions. Put d claims on Schedule D: ms Secured by Property.   |
| 1500 2018 eximate mileage: 59, information:  Hyundai Example Accent 2016   | Who has an interest in the property? Check one  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one Debtor 1 only               | the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$34,990.00  Do not deduct secured clair the amount of any secure  | d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$34,990.0  aims or exemptions. Put d claims on Schedule D:   |
| 1500 2018 eximate mileage: 59, information:  Hyundai Example Accent 2016   | Who has an interest in the property? Check one  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only | the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$34,990.00  Do not deduct secured clair the amount of any secure Creditors Who Have Clair Current value of the  | d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$34,990.0  aims or exemptions. Put d claims on Schedule D: ms Secured by Property.  Current value of the                         |
|  | rn or have any legal or equitable to Part 2. here is the property?  cribe Your Vehicles  n, lease, or have legal or equitable de drives. If you lease a vehicle  | cribe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In or have any legal or equitable interest in any residence, building, land, or similar property?  to Part 2.  here is the property?  cribe Your Vehicles  I, lease, or have legal or equitable interest in any vehicles, whether they are register. | cribe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In or have any legal or equitable interest in any residence, building, land, or similar property? to Part 2. here is the property? |

■ No

☐ Yes

Document Page 9 of 43 Case number (if known) 19-64997-WLH Debtor 1 **Travis Anthony Flanders** 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$46,940.00 pages you have attached for Part 2. Write that number here.......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No ■ Yes. Describe..... 5BR, 2LR, DR, W/D \$600.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$600.00 1 Cell Phone, 5 TVs, 1 Tablet, 1 Laptop 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$100.00 Clothes and Shoes 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$50.00 1 Watch

#### 13. Non-farm animals

Examples: Dogs, cats, birds, horses

No

☐ Yes. Describe.....

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|     | Any other personal and ■ No □ Yes. Give specific info       |          | •                           | lid not a  | Iready list, including any health aids you did not list  |  |
|-----|---|----------|-----------------------------|------------|--|--|
| 15  |   |          |                             |            | including any entries for pages you have attached  | \$1,350.00   |
| Pa  | rt 4: Describe Your Financi                                 | ial Asse | ts                          |            |  |  |
|     | you own or have any le                                      |          |                             | t in any o | of the following?  | Current value of the portion you own?  Do not deduct secured claims or exemptions. |
|     | Cash  Examples: Money you ha  □ No  • Yes                   |          | •                           |            | n a safe deposit box, and on hand when you file your pet   | ition  |
|     |   |          |                             |            | Cash   | \$105.00   |
|     |   |          |                             |            | certificates of deposit; shares in credit unions, brokerage the same institution, list each.  Institution name:          | e houses, and other similar  |
|     |   | 17.1.    | Checking                    |            | PNC Bank   | \$0.00   |
|     |   | 17.2.    | Savings                     |            | PNC Bank   | \$0.00   |
|     | Bonds, mutual funds, o  Examples: Bond funds, ii  No  ☐ Yes |          |                             | brokera    | ge firms, money market accounts  |  |
| 19. | Non-publicly traded sto joint venture  No                   | ck and   | interests in inco           | rporate    | d and unincorporated businesses, including an intere   | est in an LLC, partnership, and  |
|     | ☐ Yes. Give specific info                                   |          | about them<br>me of entity: |            | % of ownership:  |  |
| 20. | Negotiable instruments in                                   | nclude į | personal checks,            | cashiers'  | e and non-negotiable instruments c checks, promissory notes, and money orders. to someone by signing or delivering them. |  |
|     | ☐ Yes. Give specific infor                                  |          | about them<br>uer name:     |            |  |  |
|     | ■ No  | RA, ERI  | SA, Keogh, 401(k            | ), 403(b)  | , thrift savings accounts, or other pension or profit-sharin   | g plans  |
|     | ☐ Yes. List each account                                    |          | tely.<br>of account:        |            | Institution name:  |  |
| 22. |   | deposi   | ts you have made            |            | you may continue service or use from a company cutilities (electric, gas, water), telecommunications comp                | anies, or others   |
|     | ☐ Yes   |          |                             |            | Institution name or individual:  |  |

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Case number (if known) 19-64997-WLH Document Debtor 1 **Travis Anthony Flanders** 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation. Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information...

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No

☐ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

■ No

☐ Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

■ No

☐ Yes. Describe each claim.......

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| Debtor          | 1 Travis Anthony Flanders   |                             | Case number (if known)      | 19-64997-WLH            |
|-----------------|---|-----------------------------|-----------------------------|-------------------------|
| 34. <b>Ot</b> ł | er contingent and unliquidated claims of every nature, inclu  | iding counterclaims         | of the debtor and rights to | set off claims          |
|                 | 0   |                             |                             |                         |
| □ Y             | es. Describe each claim   |                             |                             |                         |
| 35. <b>An</b>   | y financial assets you did not already list   |                             |                             |                         |
|                 | 0   |                             |                             |                         |
| □ Y             | es. Give specific information   |                             |                             |                         |
|                 | dd the dollar value of all of your entries from Part 4, includin<br>r Part 4. Write that number here                          |                             | , ,                         | \$105.00                |
| Part 5:         | Describe Any Business-Related Property You Own or Have an Inter   | rest In. List any real esta | ate in Part 1.              |                         |
| 37. <b>Do</b> y | ou own or have any legal or equitable interest in any business-relat  | ed property?                |                             |                         |
| ■ No            | . Go to Part 6.   |                             |                             |                         |
| ☐ Ye            | s. Go to line 38.   |                             |                             |                         |
| Part 6:         | Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1. | Own or Have an Interes      | st In.                      |                         |
|                 | you own or have any legal or equitable interest in any farm-  | or commercial fishir        | ng-related property?        |                         |
|                 | No. Go to Part 7.   |                             |                             |                         |
|                 | Yes. Go to line 47.   |                             |                             |                         |
| Part 7:         | Describe All Property You Own or Have an Interest in That You   | u Did Not List Above        |                             |                         |
| _Ex             | you have other property of any kind you did not already list amples: Season tickets, country club membership                  | ?                           |                             |                         |
|                 | -   |                             |                             |                         |
| ЦY              | es. Give specific information   |                             |                             |                         |
| 54. <b>A</b>    | dd the dollar value of all of your entries from Part 7. Write th  | at number here              |                             | \$0.00                  |
| Part 8:         | List the Totals of Each Part of this Form   |                             |                             |                         |
| 55. <b>P</b>    | art 1: Total real estate, line 2  |                             |                             | \$0.00                  |
| 56. <b>P</b>    | art 2: Total vehicles, line 5   | \$46,940.00                 |                             |                         |
| 57. <b>P</b>    | art 3: Total personal and household items, line 15  | \$1,350.00                  |                             |                         |
|                 | art 4: Total financial assets, line 36  | \$105.00                    |                             |                         |
| 59. <b>P</b>    | art 5: Total business-related property, line 45   | \$0.00                      |                             |                         |
|                 | art 6: Total farm- and fishing-related property, line 52  | \$0.00                      |                             |                         |
|                 | art 7: Total other property not listed, line 54 +   | \$0.00                      |                             |                         |
| 62. <b>T</b>    | otal personal property. Add lines 56 through 61   | \$48,395.00                 | Copy personal property t    | otal <b>\$48,395.00</b> |
|                 |   |                             |                             |                         |

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$48,395.00

| Fill in this infor                      | mation to identify your | case:             |                              |                                      |
|---|-------------------------|-------------------|------------------------------|--------------------------------------|
| Debtor 1                                | Travis Anthony F        | landers           |                              |                                      |
|   | First Name              | Middle Name       | Last Name                    |                                      |
| Debtor 2                                |                         |                   |                              |                                      |
| (Spouse if, filing)                     | First Name              | Middle Name       | Last Name                    |                                      |
| United States Bankruptcy Court for the: |                         | NORTHERN DISTRICT | OF GEORGIA - ATLANTA DIVISIO | DN                                   |
| Case number                             | 19-64997-WLH            |                   |                              |                                      |
| (if known)                              |                         |                   |                              | ☐ Check if this is an amended filing |

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| 1. | Which set of exemptions are | you claiming? | ? Check one only | , even if | your spouse is filin | g with | you. |
|----|-----------------------------|---------------|------------------|-----------|----------------------|--------|------|
|----|-----------------------------|---------------|------------------|-----------|----------------------|--------|------|

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on<br>Schedule A/B that lists this property | Current value of the<br>portion you own |  |   | Specific laws that allow exemption |
|--|---|--|---|------------------------------------|
|  |   |  |   |                                    |
| 2018 RAM 1500 59,000 miles   | \$34,990.00                             |  | \$4,901.00  | O.C.G.A. § 44-13-100(a)(3)         |
| and nom deficulte A.E. G.  |   |  | 100% of fair market value, up to any applicable statutory limit |                                    |
| 2016 Hyundai Accent 32,000 miles   | \$11,950.00                             |  | \$99.00   | O.C.G.A. § 44-13-100(a)(3)         |
| Lille Hotti Schedule A/B. 3.2  |   |  | 100% of fair market value, up to any applicable statutory limit |                                    |
| 5BR, 2LR, DR, W/D Line from Schedule A/B: 6.1  | \$600.00                                |  | \$600.00  | O.C.G.A. § 44-13-100(a)(4)         |
| and noin deficulte A.D. G.   |   |  | 100% of fair market value, up to any applicable statutory limit |                                    |
| 1 Cell Phone, 5 TVs, 1 Tablet, 1<br>Laptop   | \$600.00                                |  | \$600.00  | O.C.G.A. § 44-13-100(a)(4)         |
| Line from Schedule A/B: 7.1  |   |  | 100% of fair market value, up to any applicable statutory limit |                                    |
| Clothes and Shoes  | \$100.00                                |  | \$100.00  | O.C.G.A. § 44-13-100(a)(4)         |
| LINE NOM SCHEWARE AVD. 11.1  |   |  | 100% of fair market value, up to any applicable statutory limit |                                    |

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|      |  |                                     |         | ` '   |                                    |
|------|--|-------------------------------------|---------|---|------------------------------------|
|      | f description of the property and line on edule A/B that lists this property |                                     |         | ount of the exemption you claim                                 | Specific laws that allow exemption |
|      |  | Copy the value from<br>Schedule A/B | Che     | eck only one box for each exemption.                            |                                    |
|      | latch<br>e from Schedule A/B: <b>12.1</b>                                    | \$50.00                             | •       | \$50.00   | O.C.G.A. § 44-13-100(a)(5)         |
| Line | TIOTH Schedule A/D. 12.1   |                                     |         | 100% of fair market value, up to any applicable statutory limit |                                    |
| Cas  | sh<br>e from Schedule A/B: 16.1  | \$105.00                            |         | \$105.00  | O.C.G.A. § 44-13-100(a)(6)         |
| LINE | Hom Schedule A/B. 10.1   |                                     |         | 100% of fair market value, up to any applicable statutory limit |                                    |
|      | ecking: PNC Bank   | \$0.00                              |         | \$0.00  | O.C.G.A. § 44-13-100(a)(6)         |
| Line | Hom Schedule A.B. 11.1   |                                     |         | 100% of fair market value, up to any applicable statutory limit |                                    |
|      | vings: PNC Bank  | \$0.00                              |         | \$0.00  | O.C.G.A. § 44-13-100(a)(6)         |
| LINE | Hom Schedule A/B. 11.2   |                                     |         | 100% of fair market value, up to any applicable statutory limit |                                    |
|      | you claiming a homestead exemption oject to adjustment on 4/01/22 and every  |                                     |         | led on or after the date of adjustme                            | nt.)                               |
|      | No   |                                     |         |   |                                    |
|      | Yes. Did you acquire the property cove                                       | red by the exemption wi             | ithin 1 | ,215 days before you filed this case                            | ?                                  |
|      | □ No   | -                                   |         | ·   |                                    |
|      | ☐ Yes  |                                     |         |   |                                    |

|                     |                          | Document            | Page 15 of 43                |                                      |
|---------------------|--------------------------|---------------------|------------------------------|--------------------------------------|
| Fill in this infor  | mation to identify your  | case:               |                              |                                      |
| Debtor 1            | Travis Anthony F         | landers             |                              |                                      |
|                     | First Name               | Middle Name         | Last Name                    |                                      |
| Debtor 2            |                          |                     |                              |                                      |
| (Spouse if, filing) | First Name               | Middle Name         | Last Name                    |                                      |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT O | F GEORGIA - ATLANTA DIVISION |                                      |
| Case number         | 19-64997-WLH             |                     |                              |                                      |
| (if known)          |                          |                     |                              | ☐ Check if this is an amended filing |
| Official For        | m 106D                   |                     |                              |                                      |
| Schedule            | D: Creditors             | Who Have Claim      | ns Secured by Property       | 12/15                                |
|                     |                          |                     |                              |                                      |

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - Yes Fill in all of the information below

|   | below.  |  |                          |                   |
|---|---|--|--------------------------|-------------------|
| Part 1: List All Secured Claims                   |   |  |                          |                   |
| 2. List all secured claims. If a creditor has     | Column A  | Column B                               | Column C                 |                   |
| for each claim. If more than one creditor has     | Amount of claim                                       | Value of collateral                    | Unsecured                |                   |
| much as possible, list the claims in alphabet     | ical order according to the creditor's name.          | Do not deduct the value of collateral. | that supports this claim | portion<br>If any |
| 2.1 American Homes 4 Rent                         | Describe the property that secures the claim:         | \$2,228.37                             | \$0.00                   | \$2,228.37        |
| Creditor's Name                                   | Lease Arrears   |  |                          |                   |
| C/o Niser Bryont                                  |   |  |                          |                   |
| 2 Sun Ct NW                                       | As of the date you file, the claim is: Check all that |  |                          |                   |
| Suite 210   | apply.  |  |                          |                   |
| Norcross, GA 30092                                | ☐ Contingent  |  |                          |                   |
| Number, Street, City, State & Zip Code            | ☐ Unliquidated  |  |                          |                   |
|   | ☐ Disputed  |  |                          |                   |
| Who owes the debt? Check one.                     | Nature of lien. Check all that apply.                 |  |                          |                   |
| Debtor 1 only                                     | ■ An agreement you made (such as mortgage or secu     | ured                                   |                          |                   |
| Debtor 2 only                                     | car loan)   |  |                          |                   |
| Debtor 1 and Debtor 2 only                        | ☐ Statutory lien (such as tax lien, mechanic's lien)  |  |                          |                   |
| ☐ At least one of the debtors and another         | ☐ Judgment lien from a lawsuit                        |  |                          |                   |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset)                   |  |                          |                   |
| Date debt was incurred                            | Last 4 digits of account number                       |  |                          |                   |

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| Debtor 1 Travis Anthony Flander  | 'S  | Case number (if known) | 19-64997-WLH |         |
|--|---|------------------------|--------------|---------|
| First Name Middle N  | lame Last Name  |                        |              |         |
| Flagship Credit Acceptance   | Describe the property that secures the claim:   | \$30,443.00            | \$34,990.00  | \$0.00  |
| Creditor's Name  | 2018 RAM 1500 59,000 miles  |                        |              |         |
|  |   |                        |              |         |
| Po Box 965<br>Chadds Ford, PA 19317  | As of the date you file, the claim is: Check all that apply.  Contingent  | ı                      |              |         |
| Number, Street, City, State & Zip Code   | ☐ Unliquidated  |                        |              |         |
| Who owes the debt? Check one.  | ☐ Disputed  Nature of lien. Check all that apply.   |                        |              |         |
| ■ Debtor 1 only □ Debtor 2 only  | An agreement you made (such as mortgage or scar loan)   | secured                |              |         |
| ☐ Debtor 1 and Debtor 2 only   | ☐ Statutory lien (such as tax lien, mechanic's lien)  |                        |              |         |
| ☐ At least one of the debtors and another  | ☐ Judgment lien from a lawsuit  |                        |              |         |
| ☐ Check if this claim relates to a community debt  | Other (including a right to offset)   |                        |              |         |
| Opened 01/18 Last Active Date debt was incurred 8/26/19  | Last 4 digits of account number   | 1                      |              |         |
| 2.3 Progressing Leasing  | Describe the property that secures the claim:   | \$70.00                | \$0.00       | \$70.00 |
| Creditor's Name  5651 W Talavi Blvd Glendale, AZ 85306  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a | As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or car loan)  Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) |                        |              |         |
| community debt   |   |                        |              |         |
| Date debt was incurred   | Last 4 digits of account number   |                        |              |         |

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| Debtor 1 Travis Anthony Flander                                       |  | Case number (if known) | 19-64997-WLH |          |
|---|--|------------------------|--------------|----------|
| First Name Middle N   | lame Last Name   |                        |              |          |
| Santander Consumer USA  | Describe the property that secures the claim:                              | \$11,851.00            | \$11,950.00  | \$0.00   |
| Creditor's Name   | 2016 Hyundai Accent 32,000 miles   |                        |              |          |
| Attn: Bankruptcy  |  |                        |              |          |
| 10-64-38-Fd7 601 Penn   | As of the date you file, the claim is: Check all that                      |                        |              |          |
| St Booding BA 40004   | apply.   |                        |              |          |
| Reading, PA 19601   | Contingent   |                        |              |          |
| Number, Street, City, State & Zip Code                                | Unliquidated   |                        |              |          |
| Who are the debto of  | Disputed   |                        |              |          |
| Who owes the debt? Check one.   | Nature of lien. Check all that apply.                                      |                        |              |          |
| ☐ Debtor 1 only ☐ Debtor 2 only                                       | <ul> <li>An agreement you made (such as mortgage or secar loan)</li> </ul> | ecured                 |              |          |
| ☐ Debtor 1 and Debtor 2 only  | ☐ Statutory lien (such as tax lien, mechanic's lien)                       |                        |              |          |
| At least one of the debtors and another                               | ☐ Judgment lien from a lawsuit   |                        |              |          |
| ☐ Check if this claim relates to a community debt                     | Other (including a right to offset)  |                        |              |          |
| Opened 06/18 Last Active 8/16/19                                      | Last 4 digits of account number  |                        |              |          |
| 2.5 Snap Finance LLC  | Describe the property that secures the claim:                              | \$1,285.00             | \$600.00     | \$685.00 |
| Creditor's Name   | 5BR, 2LR, DR, W/D  |                        |              |          |
| C/O Matthew Hawkins -   |  |                        |              |          |
| RA  | As of the date you file, the claim is: Check all that                      |                        |              |          |
| 1193 W 2400 S   | apply.   |                        |              |          |
| Salt Lake City, UT 84119  | Contingent   |                        |              |          |
| Number, Street, City, State & Zip Code                                | Unliquidated   |                        |              |          |
| Who owes the debt? Check one.   | Disputed   |                        |              |          |
| _   | Nature of lien. Check all that apply.                                      |                        |              |          |
| Debtor 1 only   | An agreement you made (such as mortgage or se                              | ecured                 |              |          |
| Debtor 2 only   | car loan)  |                        |              |          |
| Debtor 1 and Debtor 2 only  | ☐ Statutory lien (such as tax lien, mechanic's lien)                       |                        |              |          |
| At least one of the debtors and another                               | ☐ Judgment lien from a lawsuit   |                        |              |          |
| ☐ Check if this claim relates to a community debt                     | ☐ Other (including a right to offset)                                      |                        |              |          |
| Date debt was incurred  | Last 4 digits of account number  |                        |              |          |
|   |  |                        |              |          |
| _   | Column A on this page. Write that number here:                             | \$45,877               | <b>'.37</b>  |          |
| If this is the last page of your form, add<br>Write that number here: | the dollar value totals from all pages.                                    | \$45,877               | <b>.</b> .37 |          |

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

|                         |  |  | Document                          | Page 18 c   | of 43                        | •  |   |
|-------------------------|--|--|-----------------------------------|---|------------------------------|--|---|
| Fil                     | ll in this informa   | tion to identify your cas  | se:                               |   |                              |  |   |
| De                      | ebtor 1  | Travis Anthony Flan  | ders                              |   |                              |  |   |
|                         |  | First Name   | Middle Name                       | Last Name   |                              |  |   |
|                         | ebtor 2<br>pouse if, filing)   | First Name   | Middle Name                       | Last Name   |                              |  |   |
| Ur                      | nited States Bankı   | ruptcy Court for the:  | IORTHERN DISTRICT OF              | GEORGIA - ATLAN   | NTA DIVISION                 |  |   |
|                         |  | -64997-WLH   |                                   |   |                              |  |   |
| (IT K                   | known)   |  |                                   |   |                              | _  | ck if this is an  |
|                         |  |  |                                   |   |                              | ame  | nded filing   |
| ~                       | (C   | 400E/E   |                                   |   |                              |  |   |
|                         | fficial Form   |  |                                   |   |                              |  |   |
| Sc                      | chedule E/F  | F: Creditors Who   | o Have Unsecure                   | d Claims  |                              |  | 12/15   |
| eft.<br>nan<br>Pa<br>1. | Attach the Continue and case number and case number at 1: List All continue any creditors  Do any creditors  No. Go to Part  Yes.  List all of your pridentify what type possible, list the continue and case number at the co | nuation Page to this page. If er (if known).  of Your PRIORITY Unser have priority unsecured class. If of claim it is. If a claim has blaims in alphabetical order and |                                   | report in a Part, do not not not not not not not not not no | not file that Part. On the t | op of any addition  ely for each claim. Find nonpriority amo | al pages, write your or each claim listed, unts. As much as |
|                         |  | · ·  | the instructions for this form in |   | .)                           |  |   |
|                         |  |  |                                   |   | Total claim                  | Priority amount  | Nonpriority amount  |
| 2.1                     | Georgia D  | Department of Reven  | ue Last 4 digits of acc           | ount number   | \$0.00                       | \$0.0  |   |
|                         | ARCS Bai   | ce Division<br>nkruptcy  | When was the deb                  | t incurred?   |                              |  |   |
|                         |  | tury BLVD NE Suite 9<br>3A 30345-3202  | 9100                              |   |                              |  |   |
|                         |  | et City State Zip Code   | As of the date you                | file, the claim is: Che                                     | ck all that apply            |  |   |
|                         |  | he debt? Check one.  | ☐ Contingent                      |   |                              |  |   |
|                         | ■ Debtor 1 only  | /  | ☐ Unliquidated                    |   |                              |  |   |

Debtor 2 only

■ No

☐ Yes

☐ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

 $\square$  At least one of the debtors and another

 $\hfill\square$  Check if this claim is for a community debt

□ Disputed

☐ Other. Specify

Type of PRIORITY unsecured claim:

■ Taxes and certain other debts you owe the government

**Notice Only** 

 $\hfill\square$  Claims for death or personal injury while you were intoxicated

☐ Domestic support obligations

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| btor 1 Travis Anthony Flanders   |  |  |  |                                  |
|--|--|--|--|----------------------------------|
| IRS  | Last 4 digits of account number  | \$6,800.00   | \$6,800.00   | \$0.0                            |
| Priority Creditor's Name 401 W. Peachtree St., NW Stop #334-D Room 400   | When was the debt incurred?  |  |  |                                  |
| Atlanta, GA 30308  Number Street City State Zip Code  Who incurred the debt? Check one.  | As of the date you file, the claim is:   | Check all that apply   |  |                                  |
| _  | Contingent   |  |  |                                  |
| Debtor 1 only  | ☐ Unliquidated   |  |  |                                  |
| ☐ Debtor 2 only  | ☐ Disputed   |  |  |                                  |
| Debtor 1 and Debtor 2 only   | Type of PRIORITY unsecured claim:  |  |  |                                  |
| $\square$ At least one of the debtors and another  | ☐ Domestic support obligations   |  |  |                                  |
| ☐ Check if this claim is for a community debt  | ■ Taxes and certain other debts you  | owe the government   |  |                                  |
| Is the claim subject to offset?  | ☐ Claims for death or personal injury  | while you were intoxicated   |  |                                  |
| ■ No   | Other. Specify   |  |  |                                  |
| Yes  |  |  | _  |                                  |
| <ul><li>No. You have nothing to report in this part. Submit</li><li>■ Yes.</li></ul>   | this form to the court with your other sche  |  |  |                                  |
| ☐ No. You have nothing to report in this part. Submit<br>■ Yes.  | this form to the court with your other school the creditor who laim. For each claim listed, identify what to   | holds each claim. If a credito   | ims already included in<br>aims fill out the Continua                      | Part 1. If more ation Page of    |
| ■ No. You have nothing to report in this part. Submit ■ Yes.  List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2.  | this form to the court with your other sche<br>e alphabetical order of the creditor who<br>laim. For each claim listed, identify what to<br>r creditors in Part 3.If you have more than  | holds each claim. If a credito<br>ype of claim it is. Do not list cla<br>three nonpriority unsecured cla   | ims already included in  | Part 1. If more ation Page of    |
| ■ No. You have nothing to report in this part. Submit ■ Yes.  List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2.  Bank of America Nonpriority Creditor's Name 4909 Savarese Circle FI1-908-01-50  | this form to the court with your other school the creditor who laim. For each claim listed, identify what to   | holds each claim. If a credito   | ims already included in aims fill out the Continua  Total c                | Part 1. If more ation Page of    |
| ■ No. You have nothing to report in this part. Submit ■ Yes.  List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other Part 2.  Bank of America Nonpriority Creditor's Name 4909 Savarese Circle FI1-908-01-50 Tampa, FL 33634  | this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what to r creditors in Part 3.If you have more than  Last 4 digits of account number  When was the debt incurred?   | pholds each claim. If a creditorype of claim it is. Do not list clathree nonpriority unsecured classifications.  2191  Opened 04/18 Last A 08/19   | ims already included in aims fill out the Continua  Total c                | Part 1. If more<br>ation Page of |
| ■ No. You have nothing to report in this part. Submit ■ Yes.  List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2.  Bank of America Nonpriority Creditor's Name 4909 Savarese Circle FI1-908-01-50  | this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what to r creditors in Part 3.If you have more than  Last 4 digits of account number  | pholds each claim. If a creditorype of claim it is. Do not list clathree nonpriority unsecured classifications.  2191  Opened 04/18 Last A 08/19   | ims already included in aims fill out the Continua  Total c                | Part 1. If more ation Page of    |
| ■ No. You have nothing to report in this part. Submit ■ Yes.  List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2.  Bank of America Nonpriority Creditor's Name 4909 Savarese Circle FI1-908-01-50 Tampa, FL 33634 Number Street City State Zip Code  | this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what t r creditors in Part 3.If you have more than  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim in   | pholds each claim. If a creditorype of claim it is. Do not list clathree nonpriority unsecured classifications.  2191  Opened 04/18 Last A 08/19   | ims already included in aims fill out the Continua  Total c                | Part 1. If more<br>ation Page of |
| ■ No. You have nothing to report in this part. Submit  ■ Yes.  List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2.  Bank of America  Nonpriority Creditor's Name 4909 Savarese Circle FI1-908-01-50  Tampa, FL 33634  Number Street City State Zip Code Who incurred the debt? Check one.  ■ Debtor 1 only   | this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what to r creditors in Part 3.If you have more than  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is  | pholds each claim. If a creditorype of claim it is. Do not list clathree nonpriority unsecured classifications.  2191  Opened 04/18 Last A 08/19   | ims already included in aims fill out the Continua  Total c                | Part 1. If more<br>ation Page of |
| □ No. You have nothing to report in this part. Submit  ■ Yes.  List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2.  Bank of America  Nonpriority Creditor's Name 4909 Savarese Circle FI1-908-01-50  Tampa, FL 33634  Number Street City State Zip Code  Who incurred the debt? Check one.  ■ Debtor 1 only  □ Debtor 2 only   | this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what to r creditors in Part 3.If you have more than  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is  Contingent Unliquidated   | pholds each claim. If a creditorype of claim it is. Do not list clathree nonpriority unsecured classifications.  2191  Opened 04/18 Last A 08/19   | ims already included in aims fill out the Continua  Total c                | Part 1. If more<br>ation Page of |
| □ No. You have nothing to report in this part. Submit  ■ Yes.  List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2.  Bank of America  Nonpriority Creditor's Name  4909 Savarese Circle  FI1-908-01-50  Tampa, FL 33634  Number Street City State Zip Code  Who incurred the debt? Check one.  ■ Debtor 1 only  □ Debtor 2 only  □ Debtor 1 and Debtor 2 only   | this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what to r creditors in Part 3.If you have more than  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is  | p holds each claim. If a creditorype of claim it is. Do not list clathree nonpriority unsecured class.  2191  Opened 04/18 Last A 08/19  s: Check all that apply   | ims already included in aims fill out the Continua  Total c                | Part 1. If more<br>ation Page of |
| □ No. You have nothing to report in this part. Submit  ■ Yes.  List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each clathan one creditor holds a particular claim, list the other Part 2.  Bank of America  Nonpriority Creditor's Name  4909 Savarese Circle  FI1-908-01-50  Tampa, FL 33634  Number Street City State Zip Code  Who incurred the debt? Check one.  ■ Debtor 1 only  □ Debtor 2 only  □ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another  | this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what to reditors in Part 3.If you have more than  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is  Contingent Unliquidated Disputed   | p holds each claim. If a creditorype of claim it is. Do not list clathree nonpriority unsecured class.  2191  Opened 04/18 Last A 08/19  s: Check all that apply   | ims already included in aims fill out the Continua  Total c                | Part 1. If more<br>ation Page of |
| □ No. You have nothing to report in this part. Submit  ▼ yes.  List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2.  Bank of America  Nonpriority Creditor's Name  4909 Savarese Circle  FI1-908-01-50  Tampa, FL 33634  Number Street City State Zip Code  Who incurred the debt? Check one.  □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt                                    | this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what i r creditors in Part 3.If you have more than  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim i  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured  | pholds each claim. If a creditorype of claim it is. Do not list clathree nonpriority unsecured class and three nonpriority unsecured class are considered to the constant of t | ims already included in aims fill out the Continua  Total continue  Active | Part 1. If more<br>ation Page of |
| □ No. You have nothing to report in this part. Submit  ■ Yes.  List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2.  Bank of America  Nonpriority Creditor's Name 4909 Savarese Circle FI1-908-01-50  Tampa, FL 33634  Number Street City State Zip Code  Who incurred the debt? Check one.  ■ Debtor 1 only  □ Debtor 2 only  □ Debtor 2 only  □ At least one of the debtors and another  □ Check if this claim is for a community debt  Is the claim subject to offset? | this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what i r creditors in Part 3.If you have more than  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim i  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims | pholds each claim. If a creditorype of claim it is. Do not list claim three nonpriority unsecured claim.  2191  Opened 04/18 Last A 08/19  is: Check all that apply  d claim:  | ims already included in aims fill out the Continua  Total continue  Active | Part 1. If more ation Page of    |
| List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2.  Bank of America  Nonpriority Creditor's Name 4909 Savarese Circle F11-908-01-50 Tampa, FL 33634  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt   | this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what i r creditors in Part 3.If you have more than  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim i  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a sepain                        | pholds each claim. If a creditorype of claim it is. Do not list claim three nonpriority unsecured claim.  2191  Opened 04/18 Last A 08/19  s: Check all that apply  d claim:  cration agreement or divorce that g plans, and other similar debts   | ims already included in aims fill out the Continua  Total continue  Active | Part 1. If more ation Page of    |

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**Desc Main** Page 20 of 43
Case number (if known) Document Debtor 1 Travis Anthony Flanders 19-64997-WLH 4.2 \$827.00 Capital One Last 4 digits of account number 5459 Nonpriority Creditor's Name Attn: Bankruptcy Opened 01/18 Last Active Po Box 30285 When was the debt incurred? 3/22/19 Salt Lake City, UT 84130 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.3 **Cba Tifton** Last 4 digits of account number 7184 \$1,210.00 Nonpriority Creditor's Name 321 Main St When was the debt incurred? Opened 12/01/15 Tifton, GA 31794 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify **05 Anytime Fitness Tifton** ☐ Yes Citibank/Best Buy 4.4 \$2,586.00

Attn: Bankruptcy

Nonpriority Creditor's Name

Po Box 790441 St. Louis, MO 63179

Number Street City State Zip Code

Who incurred the debt? Check one.

■ Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another ☐ Check if this claim is for a community

debt

Is the claim subject to offset?

■ No ☐ Yes Last 4 digits of account number

0271

When was the debt incurred? 08/19

Opened 08/18 Last Active

As of the date you file, the claim is: Check all that apply

☐ Contingent

■ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

 $\square$  Obligations arising out of a separation agreement or divorce that you did not

report as priority claims

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Charge Account

Page 21 of 43 Case number (if known) Debtor 1 Travis Anthony Flanders 19-64997-WLH 4.5 \$520.00 **Creditors Bureau Assoc** Last 4 digits of account number 4205 Nonpriority Creditor's Name Attn: Bankruptcy Opened 5/01/17 Last Active 112 Ward St When was the debt incurred? 11/16 Macon, GA 31201 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Debt Medical** Other, Specify **Farmers Home Furniture** 4.6 Last 4 digits of account number 5811 \$173.00 Nonpriority Creditor's Name Attn: Bankruptcv Opened 09/15 Last Active Po Box 1140 When was the debt incurred? 10/27/17 Dublin, GA 31040 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Installment Sales Contract** Other. Specify 4.7 \$190.00 Lead Bank Last 4 digits of account number 2432 Nonpriority Creditor's Name Attn: Bankruptcy Opened 04/18 Last Active 200 N 3rd St When was the debt incurred? 8/03/19 Garden City, MO 64747 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Personal Loan

☐ Yes

Debtor 1 Travis Anthony Flanders

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Case number (if known) 19-64997-WLH

| 4.8 | no name on CR Liability   | Last 4 digits of account number   | 4807   | \$268.00 |  |  |
|-----|---|---|--|----------|--|--|
|     | Nonpriority Creditor's Name   | When was the debt incurred?   | Opened 08/16 Last Active 07/15               |          |  |  |
|     | Number Street City State Zip Code Who incurred the debt? Check one.                   | As of the date you file, the claim  | s: Check all that apply                      |          |  |  |
|     | ■ Debtor 1 only   | ☐ Contingent  |  |          |  |  |
|     | Debtor 2 only   | ☐ Unliquidated  |  |          |  |  |
|     | Debtor 1 and Debtor 2 only  | ☐ Disputed  |  |          |  |  |
|     | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured   | d claim:                                     |          |  |  |
|     | ☐ Check if this claim is for a community  | ☐ Student loans   |  |          |  |  |
|     | debt Is the claim subject to offset?  | Obligations arising out of a separeport as priority claims  | ration agreement or divorce that you did not |          |  |  |
|     | ■ No  | ☐ Debts to pension or profit-sharin   | g plans, and other similar debts             |          |  |  |
|     | Yes   | Other. Specify Medical De   | bt   |          |  |  |
| 4.9 | Telecom Self-reported   | Last 4 digits of account number   | F30B   | \$243.00 |  |  |
|     | Nonpriority Creditor's Name Po Box 4500   | When was the debt incurred?   | Last Active 7/24/19                          |          |  |  |
|     | Allen, TX 75013  Number Street City State Zip Code  Who incurred the debt? Check one. | As of the date you file, the claim  | s: Check all that apply                      |          |  |  |
|     | ■ Debtor 1 only   | ☐ Contingent  |  |          |  |  |
|     | Debtor 2 only   | ☐ Unliquidated  |  |          |  |  |
|     | Debtor 1 and Debtor 2 only  | ☐ Disputed  |  |          |  |  |
|     | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured   | d claim:                                     |          |  |  |
|     | ☐ Check if this claim is for a community  | ☐ Student loans   |  |          |  |  |
|     | debt<br>Is the claim subject to offset?   | ☐ Obligations arising out of a separeport as priority claims  | ration agreement or divorce that you did not |          |  |  |
|     | ■ No  | Debts to pension or profit-sharing  | g plans, and other similar debts             |          |  |  |
|     | Yes   | Other. Specify Agriculture  | Chkg/Att                                     |          |  |  |
| 4.1 | Total Visa/Bank of Missouri   | Last 4 digits of account number   | 8848   | \$316.00 |  |  |
|     | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 85710 Sioux Falls, SD 57118       | When was the debt incurred?   | Opened 07/19 Last Active 8/27/19             |          |  |  |
|     | Number Street City State Zip Code Who incurred the debt? Check one.                   | As of the date you file, the claim  | s: Check all that apply                      |          |  |  |
|     | ■ Debtor 1 only   | ☐ Contingent  |  |          |  |  |
|     | Debtor 2 only   | ☐ Unliquidated  |  |          |  |  |
|     | Debtor 1 and Debtor 2 only  | ☐ Disputed  |  |          |  |  |
|     | ☐ At least one of the debtors and another   | ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans ☐ Type of NONPRIORITY unsecured claim: ☐ Student loans |  |          |  |  |
|     | ☐ Check if this claim is for a community  |   |  |          |  |  |
|     | debt Is the claim subject to offset?  | Obligations arising out of a separeport as priority claims  | ration agreement or divorce that you did not |          |  |  |
|     | No  | Debts to pension or profit-sharing  | g plans, and other similar debts             |          |  |  |
|     | Yes   | Other. Specify Credit Card  | <u> </u>                                     |          |  |  |

Page 23 of 43 Case number (if known) Document Debtor 1 Travis Anthony Flanders 19-64997-WLH 4.1 Webbank/Gettington 5385 \$139.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 07/19 Last Active 6250 Ridgewood Rd When was the debt incurred? 8/22/19 Saint Cloud, MN 56301 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other, Specify Charge Account 4.1 Wells Fargo Bank 7585 \$37.00 Last 4 digits of account number 2 Nonpriority Creditor's Name Opened 08/12 Last Active Attn: Bankruptcy Po Box 10438 When was the debt incurred? 12/15 Des Moines, IA 50306 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Line Secured ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|                       | 6a. | Domestic support obligations  | 6a. | •  | Total Claim |
|-----------------------|-----|---|-----|----|-------------|
| Total                 | oa. | Domestic support obligations  | oa. | \$ | 0.00        |
| claims<br>from Part 1 | 6b. | Taxes and certain other debts you owe the government                    | 6b. | \$ | 6,800.00    |
|                       | 6c. | Claims for death or personal injury while you were intoxicated          | 6c. | \$ | 0.00        |
|                       | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00        |
|                       | 6e. | Total Priority. Add lines 6a through 6d.                                | 6e. | \$ | 6,800.00    |
|                       | 6f. | Student loans   | 6f. | •  | Total Claim |
| Total                 | oi. | ottuent ioans   | oi. | \$ | 0.00        |
| claims<br>from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that       | 6g. | \$ | 0.00        |

Debtor 1 Travis Anthony Flanders

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you did not report as priority claims
Debts to pension or profit-sharing plans, and other similar debts
Other. Add all other nonpriority unsecured claims. Write that amount here.

Total Nonpriority. Add lines 6f through 6i.

6h.
6i.
8,229.00

| Fill in this infor  | mation to identify your  |                   |                               |                                      |
|---------------------|--------------------------|-------------------|-------------------------------|--------------------------------------|
| Debtor 1            | Travis Anthony F         | landers           |                               |                                      |
|                     | First Name               | Middle Name       | Last Name                     |                                      |
| Debtor 2            |                          |                   |                               |                                      |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name                     | —                                    |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF GEORGIA - ATLANTA DIVISION |                                      |
| Case number         | 19-64997-WLH             |                   |                               |                                      |
| (if known)          |                          |                   |                               | ☐ Check if this is an amended filing |

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| P   | erson or company with whom you have the contract or lease<br>Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |  |
|-----|---|---|--|
| 2.1 | American Homes 4 Rent<br>C/o Niser Bryont<br>2 Sun Ct NW<br>Suite 210<br>Norcross, GA 30092                 | \$2095 rental lease                     |  |
| 2.2 | Progressing Leasing<br>5651 W Talavi Blvd<br>Glendale, AZ 85306   | \$175 Monthly lease BR Set              |  |

|                            |  |                               | II Paue 20 UL           | 4.5                                   |  |
|----------------------------|--|-------------------------------|-------------------------|---------------------------------------|--|
| Fill in thi                | s information to identify your                                       | case:                         |                         |                                       |  |
| Debtor 1                   | Travis Anthony F   | landers                       |                         |                                       |  |
|                            | First Name   | Middle Name                   | Last Name               |                                       |  |
| Debtor 2<br>(Spouse if, fi | ling) First Name   | Middle Name                   | Last Name               |                                       |  |
| United St                  | ates Bankruptcy Court for the:                                       | NORTHERN DISTRICT             | OF GEORGIA - ATLANTA    | ADIVISION                             |  |
| Case nun                   | nber <b>19-64997-WLH</b>   |                               |                         |                                       |  |
| (if known)                 |  |                               |                         |                                       | ☐ Check if this is an amended filing   |
| Officia                    | al Form 106H   |                               |                         |                                       |  |
| Sche                       | dule H: Your Cod   | ebtors                        |                         |                                       | 12/15  |
|                            |  |                               |                         | a codebtor.                           |  |
| 2. Wi                      | thin the last 8 years, have you<br>na, California, Idaho, Louisiana, | ,                             | . ,                     | \ , , ,                               | •  |
|                            | o. Go to line 3.<br>es. Did your spouse, former spou                 | use, or legal equivalent live | with you at the time?   |                                       |  |
| in lin<br>Form             | e 2 again as a codebtor only i                                       | f that person is a guarant    | or or cosigner. Make su | re you have listed t                  | ng with you. List the person shown<br>the creditor on Schedule D (Official<br>, Schedule E/F, or Schedule G to fil |
|                            | Column 1: Your codebtor<br>Name, Number, Street, City, State and ZI  | P Code                        |                         | Column 2: The cr<br>Check all schedul | reditor to whom you owe the debt les that apply:   |
|                            |  |                               |                         |                                       |  |
| 3.1                        | Kirlland Flanders<br>7421 Montogomery Rd                             |                               |                         | ■ Schedule D, □ Schedule E/F          |  |
|                            | Apt. 21  |                               |                         | □ Schodulo G                          |  |

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Cincinnati, OH 45236

Son

☐ Schedule G \_

Santander Consumer USA

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| Fill   | in this information to identify your ca  | ase:                       |                                    |             |       |                |             |              |                                   |       |
|--------|--|----------------------------|------------------------------------|-------------|-------|----------------|-------------|--------------|-----------------------------------|-------|
| Del    | otor 1 Travis Antho  | ony Flanders               |                                    |             | _     |                |             |              |                                   |       |
|        | otor 2   |                            |                                    |             |       |                |             |              |                                   |       |
| Uni    | ted States Bankruptcy Court for the  | : NORTHERN DISTRIC         | CT OF GEORGIA - A                  | ΓLANTA      |       |                |             |              |                                   |       |
| Cas    | se number 19-64997-WLH   |                            |                                    |             |       | Check          | if this is: |              |                                   |       |
| (If kr | nown)  |                            | -                                  |             |       | ☐ An           | amende      | d filing     |                                   |       |
|        |  |                            |                                    |             |       |                |             |              | postpetition cha<br>llowing date: | apter |
| 0      | fficial Form 106I  |                            |                                    |             |       | MM             | 1 / DD/ Y   | YYY          |                                   |       |
| S      | chedule I: Your Inc  | ome                        |                                    |             |       |                |             |              |                                   | 12/15 |
| atta   | use. If you are separated and you ch a separate sheet to this form.  11: Describe Employment |                            |                                    |             |       |                |             |              |                                   |       |
| 1.     | Fill in your employment information.   |                            | Debtor 1                           |             |       |                | Debtor 2    | or non-fil   | ing spouse                        |       |
|        | If you have more than one job,   | Employment status          | ■ Employed                         |             |       | I              | ■ Emplo     | yed          |                                   |       |
|        | attach a separate page with information about additional                                     | Employment status          | □ Not employed                     |             |       | [              | ☐ Not er    | mployed      |                                   |       |
|        | employers.   | Occupation                 | Project Manage                     | r           |       |                |             |              |                                   |       |
|        | Include part-time, seasonal, or self-employed work.  | Employer's name            | BMS Cat                            |             |       |                |             |              |                                   |       |
|        | Occupation may include student or homemaker, if it applies.                                  | Employer's address         | 2980 Pacific Dr,<br>Norcross, GA 3 |             |       |                |             |              |                                   |       |
|        |  | How long employed t        | here? Starts (                     | 09/23/20    | )19   |                |             |              |                                   | _     |
| Pai    | t 2: Give Details About Mor  | nthly Income               |                                    |             |       |                |             |              |                                   |       |
|        | mate monthly income as of the duse unless you are separated.                                 | ate you file this form. If | you have nothing to r              | eport for   | any l | line, write \$ | 0 in the    | space. Incl  | ude your non-filii                | ng    |
|        | ou or your non-filing spouse have mo<br>e space, attach a separate sheet to                  |                            | ombine the informatio              | n for all e | emplo | oyers for th   | at perso    | n on the lin | es below. If you                  | need  |
|        |  |                            |                                    |             |       | For Debte      | or 1        | For Deb      | tor 2 or<br>ng spouse             |       |
| 2.     | List monthly gross wages, sala deductions). If not paid monthly,                             |                            |                                    | 2.          | \$    | 5,6            | 60.00       | \$           | 0.00                              |       |
| 3.     | Estimate and list monthly overt  | ime pay.                   |                                    | 3.          | +\$   |                | 0.00        | +\$          | 0.00                              |       |

Official Form 106I Schedule I: Your Income page 1

5,660.00

0.00

Calculate gross Income. Add line 2 + line 3.

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| Deb | tor 1           | Travis Anthony Flanders   | -        | C          | ase nu      | ımber ( <i>if ki</i> | nown) | 19-6      | 4997-W              | VLH         |           |
|-----|-----------------|---|----------|------------|-------------|----------------------|-------|-----------|---------------------|-------------|-----------|
|     |                 |   |          |            | Far D       | abter 1              |       | Гот       | Dobtor              | 2 0"        |           |
|     |                 |   |          |            | roi D       | ebtor 1              |       |           | Debtor<br>-filing s |             |           |
|     | Copy            | y line 4 here   | 4.       |            | \$          | 5,660                | 0.00  | \$        |                     | 0.00        | _         |
| 5.  | List            | all payroll deductions:   |          |            |             |                      |       |           |                     |             |           |
|     | 5a.             | Tax, Medicare, and Social Security deductions   | 5a       | ١.         | \$          | 1,330                | 0.00  | \$        |                     | 0.00        |           |
|     | 5b.             | Mandatory contributions for retirement plans  | 5b       | ).         | \$          |                      | 0.00  | \$        |                     | 0.00        | _         |
|     | 5c.             | Voluntary contributions for retirement plans  | 5c       | <b>:</b> . | \$          | (                    | 0.00  | \$        |                     | 0.00        | _         |
|     | 5d.             | Required repayments of retirement fund loans  | 5d       | ۱.         | \$          | (                    | 0.00  | \$        |                     | 0.00        | _         |
|     | 5e.             | Insurance   | 5e       |            | \$          |                      | 0.00  | \$        |                     | 0.00        | _         |
|     | 5f.             | Domestic support obligations  | 5f.      |            | \$          |                      | 0.00  | \$_       |                     | 0.00        | _         |
|     | 5g.<br>5h.      | Union dues Other deductions. Specify: ESTIMATED DEDUCTIONS  | 5g<br>5h | •          | \$          |                      | 0.00  | *<br>+ \$ |                     | 0.00        | _         |
| 6.  |                 | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.       |            | *<br>\$     | 1,780                | _     | \$<br>    |                     | 0.00        | _         |
| 7.  |                 | rulate total monthly take-home pay. Subtract line 6 from line 4.  | 7.       |            | Ψ ——<br>\$  |                      |       | \$<br>_   |                     |             | _         |
|     |                 |   | ٧.       |            | Ψ           | 3,880                | .00   | Ψ         |                     | 0.00        | -         |
| 8.  | List a          | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  |          |            |             |                      |       |           |                     |             |           |
|     |                 | Attach a statement for each property and business showing gross   |          |            |             |                      |       |           |                     |             |           |
|     |                 | receipts, ordinary and necessary business expenses, and the total monthly net income.   | 8a       |            | \$          |                      | 0.00  | \$        |                     | 0.00        |           |
|     | 8b.             | Interest and dividends  | 8b       |            | \$—         |                      | 0.00  | \$        |                     | 0.00        | _         |
|     | 8c.             | Family support payments that you, a non-filing spouse, or a dependent   |          | •          | Ψ           |                      |       | Ψ_        |                     | 0.00        | _         |
|     |                 | regularly receive   |          |            |             |                      |       |           |                     |             |           |
|     |                 | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  | 8c       |            | \$          |                      | 0.00  | \$        |                     | 0.00        |           |
|     | 8d.             | Unemployment compensation   | 8d       |            | <u>\$</u> — |                      | 0.00  | \$-       |                     | 0.00        | _         |
|     | 8e.             | Social Security   | 8e       |            | \$          |                      | 0.00  | \$_       |                     | 0.00        | _         |
|     | 8f.             | Other government assistance that you regularly receive  |          |            |             |                      |       | _         |                     |             | _         |
|     |                 | Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental  | )        |            |             |                      |       |           |                     |             |           |
|     |                 | Nutrition Assistance Program) or housing subsidies.   | 8f.      |            | φ           |                      |       | ¢         |                     | 0.00        |           |
|     | 8g.             | Specify: Pension or retirement income   | — 8g     |            | \$          |                      | 0.00  | \$        |                     | 0.00        | _         |
|     | 8h.             | Other monthly income. Specify: Fiance's Contribution  | 8h       | ,          | <u>\$</u> — | 2,600                |       | + \$-     |                     | 0.00        | _         |
|     |                 | · · · · · · · · · · · · · · · · · · ·   | _        |            |             |                      |       | Ė         |                     |             | -<br>¬    |
| 9.  | Add             | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.       | \$         | ·           | 2,600                | 0.00  | \$        |                     | 0.0         | 0         |
| 10. | Calc            | ulate monthly income. Add line 7 + line 9.  | 10.      | \$         | 6.          | 480.00               | + \$  |           | 0.00                | = \$        | 6,480.00  |
|     |                 | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  |          | · –        | •           | 100100               | L -   |           | 0.00                |             | 0,100100  |
| 11. | Inclu-<br>other | e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your r friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not cify: | depe     |            |             |                      |       | •         |                     | e J.<br>+\$ | 0.00      |
| 12. |                 | the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certailes   |          |            |             |                      |       |           | 12.                 | \$          | 6,480.00  |
|     |                 |   |          |            |             |                      |       |           |                     | Combi       |           |
| 13. | Do v            | ou expect an increase or decrease within the year after you file this form  | ?        |            |             |                      |       |           |                     | month       | ly income |
|     | ,               | No.   | -        |            |             |                      |       |           |                     |             |           |
|     | _               | Vas Evnlain:  |          |            |             |                      |       |           |                     |             |           |

Official Form 106l Schedule I: Your Income page 2

| Fill | in this information to identify your case:   |  |                    |                 |                               |
|------|--|--|--------------------|-----------------|-------------------------------|
| Deb  | otor 1 Travis Anthony Flanders   | (  | Check if           | f this is:      |                               |
| Deb  | otor 2   |  |                    | amended filing  | ring postpetition chapter     |
| 1    | ouse, if filing)   |  |                    |                 | the following date:           |
| Unit | ted States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGATLANTA DIVISION  | GIA -  | MN                 | // DD / YYYY    |                               |
|      | se number 19-64997-WLH (nown)  |  |                    |                 |                               |
|      | fficial Form 106J  |  |                    |                 |                               |
|      | chedule J: Your Expenses   |  |                    |                 | 12/1                          |
| info | as complete and accurate as possible. If two married people are commation. If more space is needed, attach another sheet to this formber (if known). Answer every question.                    |  |                    |                 |                               |
| 1.   | Is this a joint case?  |  |                    |                 |                               |
|      | ■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?   |  |                    |                 |                               |
|      | ☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses fo</i>  | or Separate Household of                         | Debtor             | 2.              |                               |
| 2.   | Do you have dependents? $\square$ No   |  |                    |                 |                               |
|      | Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent  | Dependent's relationship to Debtor 1 or Debtor 2 | о                  | Dependent's age | Does dependent live with you? |
|      | Do not state the   | 0  |                    | 44              | □ No                          |
|      | dependents names.  | Son  |                    | 14 years        | ■ Yes<br>□ No                 |
|      |  |  |                    |                 | ☐ Yes                         |
|      |  |  |                    |                 | □ No                          |
|      |  |  |                    |                 | ☐ Yes<br>☐ No                 |
|      |  |  |                    |                 | ☐ Yes                         |
| 3.   | Do your expenses include expenses of people other than yourself and your dependents? ■ No □ Yes  |  |                    |                 |                               |
| exp  | Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless you benses as of a date after the bankruptcy is filed. If this is a supple plicable date. |  |                    |                 |                               |
| the  | clude expenses paid for with non-cash government assistance if y<br>evalue of such assistance and have included it on <i>Schedule I: You</i><br>ficial Form 106I.)                             |  |                    | Your expe       | enses                         |
| 4.   | The rental or home ownership expenses for your residence. Incompayments and any rent for the ground or lot.  | lude first mortgage                              | 4. \$ _            |                 | 2,095.00                      |
|      | If not included in line 4:   |  |                    |                 |                               |
|      | 4a. Real estate taxes  | 48   | a. \$              |                 | 0.00                          |
|      | 4b. Property, homeowner's, or renter's insurance   |  | o. \$ _            |                 | 0.00                          |
|      | Home maintenance, repair, and upkeep expenses     Homeowner's association or condominium dues  |  | c. \$ _<br>d. \$ _ |                 | 0.00                          |
| 5.   | Additional mortgage payments for your residence, such as home  |  | μ. φ<br>5. \$      |                 | 0.00                          |

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| btor 1            | Travis Anthony Flanders  | Case num       | ber (if known)   | 19-64997-WLH               |
|-------------------|--|----------------|------------------|----------------------------|
| Utilitie          | es:  |                |                  |                            |
|                   | Electricity, heat, natural gas   | 6a.            | \$               | 380.00                     |
|                   | Water, sewer, garbage collection   | 6b.            | · ·              | 175.00                     |
|                   | Telephone, cell phone, Internet, satellite, and cable services   | 6c.            |                  | 0.00                       |
|                   | Other Specify Collular Phone   | 6d.            |                  | 305.00                     |
|                   | Cable/Internet/Alarm   |                | \$               | 150.00                     |
| _                 | and housekeeping supplies  |                | \$               | 685.00                     |
|                   | care and children's education costs  | 8.             | \$               | 0.00                       |
| -                 | ing, laundry, and dry cleaning   | 9.             | ·                | 150.00                     |
|                   | · · · · · · · · · · · · · · · · · · ·  | 9.<br>10.      |                  |                            |
|                   | nal care products and services   |                | ·                | 150.00                     |
|                   | al and dental expenses   | 11.            | Ф                | 125.00                     |
|                   | portation. Include gas, maintenance, bus or train fare. t include car payments.  | 12.            | \$               | 550.00                     |
|                   | tainment, clubs, recreation, newspapers, magazines, and books  | 13.            | ·                | 0.00                       |
|                   | table contributions and religious donations  | 14.            |                  | 0.00                       |
| . Insura          | •  | 14.            | Ψ                | 0.00                       |
|                   | t include insurance deducted from your pay or included in lines 4 or 20.   |                |                  |                            |
|                   | Life insurance   | 15a.           | \$               | 0.00                       |
|                   | Health insurance   | 15b.           |                  | 0.00                       |
|                   | Vehicle insurance  | 15c.           |                  | 427.00                     |
|                   | Other insurance. Specify:  | 15d.           | ·                | 0.00                       |
|                   | b. Do not include taxes deducted from your pay or included in lines 4 or 20.   | 15u.           | Ψ                | 0.00                       |
| . raxes<br>Specif |  | 16.            | \$               | 0.00                       |
| •                 | Iment or lease payments:   |                | <b>—</b>         | 0.00                       |
|                   | Car payments for Vehicle 1   | 17a.           | \$               | 712.00                     |
|                   | Car payments for Vehicle 2   | 17b.           |                  | 0.00                       |
|                   | Other. Specify: Fiance Car Payment   | 17b.<br>17c.   |                  | 525.00                     |
|                   | Other. Specify: Progressive Leasing  | 17c.           |                  |                            |
|                   |  |                | Ψ                | 51.00                      |
|                   | payments of alimony, maintenance, and support that you did not report a<br>sted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I) |                | \$               | 0.00                       |
| Other             | payments you make to support others who do not live with you.  | ,              | \$               | 0.00                       |
| Specif            |  | 19.            | *                | 0.00                       |
|                   | real property expenses not included in lines 4 or 5 of this form or on ScI   |                | ur Income        |                            |
|                   | Mortgages on other property  | 20a.           |                  | 0.00                       |
|                   | Real estate taxes  | 20b.           | ·                | 0.00                       |
|                   | Property, homeowner's, or renter's insurance   | 20c.           | ·                | 0.00                       |
|                   | Maintenance, repair, and upkeep expenses   | 20d.           |                  |                            |
|                   |  |                | *                | 0.00                       |
|                   | Homeowner's association or condominium dues  | 20e.           |                  | 0.00                       |
| . Other           | : Specify:   | 21.            | +\$              | 0.00                       |
| . Calcu           | late your monthly expenses   |                |                  |                            |
|                   | dd lines 4 through 21.   |                | \$               | 6,480.00                   |
|                   | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  | !              | \$               | <u> </u>                   |
|                   |  |                | \$ ———           | C 400 00                   |
| ZZC. A            | dd line 22a and 22b. The result is your monthly expenses.  |                | Φ                | 6,480.00                   |
| . Calcu           | late your monthly net income.  |                |                  |                            |
|                   | Copy line 12 (your combined monthly income) from Schedule I.   | 23a.           | \$               | 6,480.00                   |
|                   | Copy your monthly expenses from line 22c above.  | 23b.           |                  | 6,480.00                   |
| _5~.              |  |                |                  | <del></del>                |
| 23c.              | Subtract your monthly expenses from your monthly income.   |                |                  |                            |
|                   | The result is your monthly net income.   | 23c.           | \$               | 0.00                       |
|                   | ,  |                |                  |                            |
|                   | u expect an increase or decrease in your expenses within the year after y  | you file this  | form?            |                            |
| 1. Do yo          |  |                |                  | sono or doorooo booouso (  |
| For exa           | ample, do you expect to finish paying for your car loan within the year or do you expect yo  | our mortgage p | payment to incre | ease of decrease because t |
| For exa           | ation to the terms of your mortgage?   | our mortgage p | payment to incre | ease of decrease because   |
| For exa           | ation to the terms of your mortgage?   | our mortgage p | payment to incre | ease of decrease because   |

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| Fill in this infor  | mation to identify your  | case:             |                               |                      |
|---------------------|--------------------------|-------------------|-------------------------------|----------------------|
| Debtor 1            | Travis Anthony F         |                   |                               | _                    |
|                     | First Name               | Middle Name       | Last Name                     |                      |
| Debtor 2            |                          |                   |                               |                      |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name                     | _                    |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF GEORGIA - ATLANTA DIVISION | _                    |
| Case number         | 19-64997-WLH             |                   |                               |                      |
| (if known)          |                          |                   |                               | ☐ Check if this is a |
|                     |                          |                   |                               | amended filing       |
|                     |                          |                   |                               | amended ming         |

### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

| Identify the creditor and the property that is collateral | What do you intend to do with the property that<br>secures a debt? | Did you claim the property as exempt on Schedule C? |
|---|--|---|
|   |  |   |
| Creditor's American Homes 4 Rent                          | ☐ Surrender the property.  | □ No  |
| name:   | ☐ Retain the property and redeem it.                               | _   |
| Description of Lease Arrears                              | Retain the property and enter into a<br>Reaffirmation Agreement.   | ■ Yes   |
| property securing debt:                                   | ☐ Retain the property and [explain]:                               |   |
|   |  |   |
| Creditor's Flagship Credit Acceptance                     | ☐ Surrender the property.  | □ No  |
| name:   | Retain the property and redeem it.                                 |   |
| Description of <b>2018 RAM 1500 59,000 miles</b>          | Retain the property and enter into a<br>Reaffirmation Agreement.   | ■ Yes   |
| property securing debt:                                   | ☐ Retain the property and [explain]:                               |   |
| Securing debt.  |  |   |
| Creditor's Progressing Leasing                            | ☐ Surrender the property.  | □ No  |
| name:   | Retain the property and redeem it.                                 | LI IVO  |
| Description of  | Retain the property and enter into a                               | ■ Yes   |
| property  | Reaffirmation Agreement.  ☐ Retain the property and [explain]:     |   |
| property  | Li Retain the property and [explain].                              |   |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

## Case 19-64997-wlh Doc 14 Filed 12/03/19 Entered 12/03/19 17:14:28 Desc Main Document Page 32 of 43

| Debtor 1 Travis Ant                                  | hony Flanders                           | Case number (if known)  | 19-64997-WLH                    |
|--|---|---|---------------------------------|
| securing debt:                                       | -                                       |   | -                               |
| Creditor's <b>Santan</b> name:                       |   | ☐ Surrender the property. ☐ Retain the property and redeem it.  | □ No                            |
| Description of property mile securing debt:          | 6 Hyundai Accent 32,000                 | <ul> <li>■ Retain the property and enter into a Reaffirmation Agreement.</li> <li>□ Retain the property and [explain]:</li> </ul>                     | ■ Yes                           |
| Creditor's Snap F                                    | inance LLC                              | ☐ Surrender the property. ☐ Retain the property and redeem it.  | □ No                            |
| Description of 5BR property                          |   | <ul> <li>Retain the property and enter into a<br/>Reaffirmation Agreement.</li> <li>Retain the property and [explain]:</li> </ul>                     | ■ Yes                           |
| For any unexpired persing the information below      | w. Do not list real estate leases. Unex | Schedule G: Executory Contracts and Unexpired pired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p)(2) | lease period has not yet ended. |
| Describe your unexpir                                | ed personal property leases             |   | Will the lease be assumed?      |
| Lessor's name:<br>Description of leased<br>Property: |   |   | □ No                            |
| Lessor's name:<br>Description of leased<br>Property: |   |   | □ No                            |
| Lessor's name:<br>Description of leased<br>Property: |   |   | □ No                            |
| Lessor's name:<br>Description of leased<br>Property: |   |   | □ No                            |
| Lessor's name:<br>Description of leased<br>Property: |   |   | □ No                            |
| Lessor's name:<br>Description of leased<br>Property: |   |   | □ No                            |
| Lessor's name:<br>Description of leased<br>Property: |   |   | □ No                            |
| Part 3: Sign Below                                   |   |   |                                 |

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7

page 2

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| Deb | otor 1 | Travis Anthony Flanders                  | Case number (if known) | 19-64997-WLH |  |
|-----|--------|--|------------------------|--------------|--|
|     |        | ravis Anthony Flanders                   | X                      |              |  |
|     |        | is Anthony Flanders<br>ature of Debtor 1 | Signature of Debtor 2  |              |  |
|     | Date   | December 3, 2019                         | Date                   |              |  |

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B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** NORTHERN DISTRICT OF GEORGIA - ATLANTA DIVISION

| In re       | Travis Anthony Flanders   | Case No.  | 19-64997-WLH  |
|-------------|---|---|---|
|             | Debtor(s)   | Chapter   | 7   |
|             | DISCLOSURE OF COMPENSATION OF ATTORNI   | EY FOR DE   | BTOR(S)   |
| (           | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for compensation paid to me within one year before the filing of the petition in bankruptcy, or a be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankrup  | greed to be paid  | to me, for services rendered or to  |
|             | For legal services, I have agreed to accept   | \$  | 1,400.00  |
|             | Prior to the filing of this statement I have received   | \$  | 0.00  |
|             | Balance Due   | \$  | 1,400.00  |
| 2. 5        | \$ <b>25.00</b> of the filing fee has been paid.  |   |   |
| 3.          | The source of the compensation paid to me was:  |   |   |
|             | ■ Debtor □ Other (specify):   |   |   |
| 4.          | The source of compensation to be paid to me is:   |   |   |
|             | ■ Debtor □ Other (specify):   |   |   |
| 4. The 5. ■ | ■ I have not agreed to share the above-disclosed compensation with any other person unless  | ss they are memb  | pers and associates of my law firm.   |
|             | ☐ I have agreed to share the above-disclosed compensation with a person or persons who a copy of the agreement, together with a list of the names of the people sharing in the compensation.  |   |   |
| 6.          | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of   | the bankruptcy ca   | ase, including:   |
| ž.          | <ul> <li>a. [Other provisions as needed]</li> <li>no limitation except as set forth in paragraph 7 below.</li> </ul>  |   |   |
| 7. 1        | By agreement with the debtor(s), the above-disclosed fee does not include the following server a. These fees do not include certain costs associated with this case. Costs, credit and financial management counseling costs, witness and Client's credit report.  b. The contract between the parties does not include fees for represent Client is served with an adversary proceeding complaint, Attorney share represent Client's best interests until such time as either Client inform litigate the matter. Client affirmatively declines Attorney's representations. | Client shall be<br>I appraisal fee<br>ting Client in a<br>Ill take approp<br>s Attorney tha | s, and the costs to obtain adversary proceedings. If riate steps to protect and t Client does not wish to |

- gate the matter, Client affirmatively declines Attorney's representation, Client obtains other counsel, or, Attorney is allowed to withdraw by the Court.
- c. The parties have agreed that Attorney may seek an additional fee of up to \$700 for each Motion to Redeem Personal Property which is filed by Attorney and approved by the Court in this case.

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| In re | Travis Anthony Flanders | Case No. | 19-64997-WLH |
|-------|-------------------------|----------|--------------|
|       |                         |          |              |

Debtor(s)

### DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

#### CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. I certify that a copy of each of the notices required by 11 U.S.C. Section 342(b), Section 527(a)(2), and Section 527(b) has been provided to, and discussed with, the debtor(s).

December 3, 2019 /s/ lesha Warmack, GA Bar No. Date

lesha Warmack, GA Bar No. 865980 Signature of Attorney

Clark & Washington, L.L.C. 3300 Northeast Expressway

**Building 3** 

Atlanta, GA 30341

770-488-9338 Fax: 770-220-0685

cworders@cw13.com

Name of law firm

Date December 3, 2019 /s/ Travis Anthony Flanders Signature

**Travis Anthony Flanders** 

Debtor

| Fill in this infor  | mation to identify your  | case:             |                           |                           |  |
|---------------------|--------------------------|-------------------|---------------------------|---------------------------|--|
| Debtor 1            | Travis Anthony F         | landers           |                           |                           |  |
|                     | First Name               | Middle Name       | Last Name                 |                           |  |
| Debtor 2            |                          |                   |                           |                           |  |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name                 |                           |  |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF GEORGIA - ATLANTA DIVI | SION                      |  |
| Case number         | 19-64997-WLH             |                   |                           |                           |  |
| (if known)          | 10 04001 11211           |                   |                           | ☐ Check if thi amended fi |  |

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file vour original forms, you must fill out a new Summary and check the box at the top of this page.

| Pai | t 1: Summarize Your Assets   |              |                         |
|-----|--|--------------|-------------------------|
|     |  | Your as      | ssets<br>f what you own |
| 1.  | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$           | 0.00                    |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$           | 48,395.00               |
|     | 1c. Copy line 63, Total of all property on Schedule A/B  | \$           | 48,395.00               |
| Pai | t 2: Summarize Your Liabilities  |              |                         |
|     |  |              | abilities<br>t you owe  |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$           | 45,877.37               |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                            | \$           | 6,800.00                |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$           | 8,229.00                |
|     | Your total liabilities   | \$           | 60,906.37               |
| Pai | t 3: Summarize Your Income and Expenses  |              |                         |
| 4.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$           | 6,480.00                |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$           | 6,480.00                |
| Pai | t 4: Answer These Questions for Administrative and Statistical Records   |              |                         |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                     | ur other sch | nedules.                |
| 7.  | ■ Yes What kind of debt do you have?   |              |                         |
|     | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for   | a personal,  | family, or              |

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 Travis Anthony Flanders

Page 37 of 43 Case number (if known) 19-64997-WLH

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

7,107.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total c | laim     |
|--|---------|----------|
| From Part 4 on Schedule E/F, copy the following:   |         |          |
| 9a. Domestic support obligations (Copy line 6a.)   | \$      | 0.00     |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$      | 6,800.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$      | 0.00     |
| 9d. Student loans. (Copy line 6f.)   | \$      | 0.00     |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$      | 0.00     |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$     | 0.00     |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$      | 6,800.00 |

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| Fill in this inf                                | ormation to identify your                         | case:   |                        |                            |  |
|---|---|---|------------------------|----------------------------|--|
| Debtor 1  | Travis Anthony F                                  |   |                        |                            |  |
| Debtor 2  | First Name  | Middle Name   | Last Name              |                            |  |
| (Spouse if, filing)                             | First Name  | Middle Name   | Last Name              |                            |  |
| United States                                   | Bankruptcy Court for the:                         | NORTHERN DISTRIC  | T OF GEORGIA - AT      | LANTA DIVISION             |  |
|   | , ,   |   |                        |                            |  |
| Case number                                     | 19-64997-WLH                                      |   |                        |                            |  |
| (if known)                                      |   |   |                        |                            | ☐ Check if this is an amended filing   |
| f two married<br>You must file<br>obtaining mor |   | r, both are equally response to the conference of the conference of the connection with a bar | onsible for supplyin   | ng correct information.    | atement, concealing property, or 000, or imprisonment for up to 20             |
| s   | ign Below   |   |                        |                            |  |
| Did you   | pay or agree to pay some                          | one who is NOT an atto  | orney to help you fill | out bankruptcy forms?      |  |
| ■ No  |   |   |                        |                            |  |
| ☐ Yes   | . Name of person                                  |   |                        |                            | ankruptcy Petition Preparer's Notice,<br>on, and Signature (Official Form 119) |
|   | nalty of perjury, I declare are true and correct. | that I have read the sur  | mmary and schedule     | es filed with this declara | tion and   |
| X /s/ T   | ravis Anthony Flanders                            | s   | Х                      |                            |  |
| Trav  | ris Anthony Flanders ature of Debtor 1            | <u>~</u>  |                        | ure of Debtor 2            |  |
| Date  | December 3 2019                                   |   | Date                   |                            |  |

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### United States Bankruptcy Court NORTHERN DISTRICT OF GEORGIA - ATLANTA DIVISION

| In re  | Travis Anthony Flanders |                             | Case No. |                       |
|--------|-------------------------|-----------------------------|----------|-----------------------|
|        |                         | Debtor(s)                   | Chapter  | 7                     |
| The ab |                         | RIFICATION OF CREDITOR M    |          | of his/her knowledge. |
| Date:  | December 3, 2019        | /s/ Travis Anthony Flanders |          |                       |
| Date.  |                         | Travis Anthony Flanders     |          |                       |
|        |                         | Signature of Debtor         |          |                       |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: |        | Liquidation        |
|------------|--------|--------------------|
|            | \$245  | filing fee         |
|            | \$75   | administrative fee |
|            | + \$15 | trustee surcharge  |
|            | \$335  | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.